

United States Bankruptcy Court Southern District of New York		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Peterson, Carolyn		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): None		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 6150		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State) 140 DeKruif Place Apt # 29H Bronx, NY		Street Address of Joint Debtor (No. and Street, City, and State)
ZIPCODE 10475		ZIPCODE
County of Residence or of the Principal Place of Business: Bronx		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):		Mailing Address of Joint Debtor (if different from street address):
ZIPCODE		ZIPCODE
Location of Principal Assets of Business Debtor (if different from street address above):		ZIPCODE
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other N.A.	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: _____ Each country in which a foreign proceeding by, regarding, or against debtor is pending: _____	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code)	Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. §101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>). Check all applicable boxes <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Carolyn Peterson

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location
Where Filed: NONE

Case Number:

Date Filed:

Location
Where Filed: N.A.

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: NONE

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)

☐ Exhibit A is attached and made a part of this petition.

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).

X /s/ David J Babel April 16, 2012
Signature of Attorney for Debtor(s) Date

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

☒ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

Riverbay Corp. Legal Department
(Name of landlord that obtained judgment)

2049 Bartow Avenue

Bronx, NY 10475
(Address of landlord)

☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

☒ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

☒ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Voluntary Petition*(This page must be completed and filed in every case)*

Name of Debtor(s):

Carolyn Peterson

Signatures**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Carolyn Peterson

Signature of Debtor

X _____

Signature of Joint Debtor

Telephone Number (If not represented by attorney)April 16, 2012

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)☐

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 of title 11 are attached.

☐

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)_____
(Date)**Signature of Attorney*****X** /s/ David J Babel

Signature of Attorney for Debtor(s)

DAVID J BABEL

Printed Name of Attorney for Debtor(s)

David J. Babel, Esq., P.C.

Firm Name

2525 Eastchester Road

Address

Bronx, NY 10469718-881-7964

Telephone Number

April 16, 2012

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____

Signature of Authorized Individual

Printed Name of Authorized Individual_____
Title of Authorized Individual_____
Date**Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address**X** __________
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B1 D (Official Form 1, Exhibit D) (12/09)

UNITED STATES BANKRUPTCY COURT
Southern District of New York

In re Carolyn Peterson
Debtor(s)

Case No. _____
(if known)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.



1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*



2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Carolyn Peterson
CAROLYN PETERSON

Date: April 16, 2012

B6 Cover (Form 6 Cover) (12/07)

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

In re Carolyn Peterson Debtor Case No. (If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
Total			0.00	

(Report also on Summary of Schedules.)

In re Carolyn Peterson Debtor Case No. (If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking & Savings Account MCU		50.00
		Checking Chase		10.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Household Goods		3,000.00
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Wearing Apparel		1,000.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		TDA		10,000.00

In re Carolyn Peterson Debtor Case No. (If known)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		NYC Teachers' Retirement System Pension Qualified and vested but unmatured Cooperative 140 DeKruif Place #29H; Bronx, NY 10475; Riverbay Corp; Co-op City; Mitchell Lama low-Inocme Housing Co-op		50,000.00 14,183.00
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			

In re Carolyn Peterson Debtor Case No. (If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		Automobile 2011 Nissan Altima 2.5S		17,300.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
0 continuation sheets attached Total				\$ 95,543.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Carolyn Peterson

Case No. _____

Debtor

(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPTDebtor claims the exemptions to which debtor is entitled under:
(Check one box)☐ 11 U.S.C. § 522(b)(2)☐ Check if debtor claims a homestead exemption that exceeds
\$146,450*.☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Household Goods	NY Civ Prac Law & Rules § 5205(a)(5)	3,000.00	3,000.00
Wearing Apparel	NY Civ Prac Law & Rules § 5205(a)(5)	1,000.00	1,000.00
TDA	NY Debt & Cred Law § 282(iii)(2)(e)	100% of FMV	10,000.00
Pension	NY Debt & Cred Law § 282(iii)(2)(e)	100% of FMV	50,000.00
Cooperative	NY Civ Prac Law & Rules § 5206(a)	14,183.00	14,183.00

*Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)

In re Carolyn Peterson,

Case No. _____

Debtor

(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.							
AMERICREDIT PO BOX 183123 ARLINGTON, TX 76096						29,688.00	12,388.00
		VALUE \$ 17,300.00					
ACCOUNT NO.							
LAZARUS LAZARUS WINSTON 3699 BAINBRIDGE AVENUE BRONX, NY 6 10467						Notice Only	Notice Only
		VALUE \$ 0.00					
ACCOUNT NO. 6536/12							
RIVERBAY CORP. LEGAL 2049 BARTOW AVENUE BRONX, NY 10475		Incurred: 2011-2012 Lien: co-op arrears				7,143.00	7,143.00
		VALUE \$ 0.00					

0 continuation sheets attached

Subtotal (Total of this page)	\$ 36,831.00	\$ 19,531.00
Total (Use only on last page)	\$ 36,831.00	\$ 19,531.00

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B6E (Official Form 6E) (04/10)

In re Carolyn Peterson
Debtor

Case No. _____
(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

*Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (04/10) - Cont.In re Carolyn Peterson,
DebtorCase No. _____
(if known)☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

** Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

0 continuation sheets attached

B6F (Official Form 6F) (12/07)

In re Carolyn Peterson,

Case No. _____

Debtor

(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 03428835102 AFNI 404 BROCK DRIVE PO BOX 3427 BLOOMINGTON, IL 61702		Incurred: 2010 Consideration: Collection T-Mobile				Notice Only
ACCOUNT NO. 001899359 ALLIANCE ASSET MANAGEMENT, INC DEPARTMENT # 5975 PO BO 1259 OAKS, PA 19456		Incurred: 2008-2010 Consideration: Collection Ridealget				850.00
ACCOUNT NO. 003705539 ALLIED INTERSTATE PO BOX 436 MINNEAPOLIS, MN 55440		Incurred: 2010-2011 Consideration: Collection Equable Ascent Financial				Notice Only
ACCOUNT NO. 18148859 ALLIED INTERSTATE PO BOX 436 MINNEAPOLIS, MN 55440		Incurred: 2010-2011 Consideration: Collection Verizon				Notice Only
20 continuation sheets attached						Subtotal ➤ \$ 850.00
						Total ➤ \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson, Debtor

Case No. (If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 802000151043099965 AMERICAN CORADIUS, INC. 300 ESSJAY ROAD SUITE 150 WILLIAMSVILLE, NY 14221		Incurred: 2010 Consideration: Collection Chase Bank				Notice Only
ACCOUNT NO. AMERICAN EXPRESS CUSTOMER SERVICE PO BOX 981535 EL PASO, TX 79998		Incurred: 2009-2010 Consideration: Credit card debt				0.00
ACCOUNT NO. AMERICAN EXPRESS CUSTOMER SERVICE PO BOX 981540 EL PASO, TX 79998		Consideration: Credit card debt				Notice Only
ACCOUNT NO. 14961789 ASSOCIATED REC. PO BOX 469048 ESCONDIDO, CA 92046		Incurred: 2008 Consideration: Collection MRC Receivables				Notice Only
ACCOUNT NO. 483025496931 BANK OF AMERICA PO BOX 15026 WILMINGTON, DE19886		Incurred: 2008-2010 Consideration: Credit card debt				598.00

Sheet no. 1 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal \$ 598.00

Total \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. BANK OF AMERICA RETAIL LOAN SERVICES P.O. BOX 2759 JACKSONVILLE, FL 32203		Incurred: 2009-2010 Consideration: Credit card debt				Notice Only
ACCOUNT NO. 16369765 BENNET LAW PLLC PO BOX 9163 MIDVALE, UT 84047		Incurred: 2009 Consideration: Collection				Notice Only
ACCOUNT NO. 16369765 BENNETT LAW INC 10542 SOUTH JORDAN GATEWAY SUITE 200 SOUTH JORDAN, UTAH, 84095		Incurred: 2009 Consideration: Collection Yonker Raceway				Notice Only
ACCOUNT NO. 802000151043099965 CAPITAL MANAGEMENT SERVICES, LP 726 EXCHANGE STREET SUITE 700 BUFFALO, NY 14210		Incurred: 2009 Consideration: Collection Chase				Notice Only
ACCOUNT NO. 6206217925313 CAPITAL ONE AUTO FINANCE 3905 DALLAS PARKWAY PLANO, TX 75093		Incurred: 2012 Consideration: Repossession				8,711.51

Sheet no. 2 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 8,711.51

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4388642054659118 CAPITAL ONE BANK P.O. BOX 30285 SALT LAKE CITY, UT 84130		Incurred: 2007-2009 Consideration: Credit card debt				2,433.00
ACCOUNT NO. CAPITAL ONE SERVICES, INC. 1957 WESTMORELAND ROAD RICHMOND, VA 23276		Incurred: 2009-2010 Consideration: Credit card debt				0.00
ACCOUNT NO. 6019001 CASHCALL PO BOX 66007 ANAHEIM CA 92816		Incurred: 2010-2011 Consideration: Loan Two Accounts				1,409.00
ACCOUNT NO. 0393179947 CBCS PO BOX 165025 COLUMBUS, OH 43216		Incurred: 2010 Consideration: Collection Verizon				Notice Only
ACCOUNT NO. CBE GROUP 1309 TECHNOLOGY PKWAY CEDAR FALLS, IA 50613						Notice Only

Sheet no. 3 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 3,842.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson, Debtor

Case No. (If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. TB4450 CCB CREDIT SERV., INC. 5300 S. 6TH STREET SPRINGFIELD, IL 62703		Incurred: 2008-2009 Consideration: Collection First Premier Bank				Notice Only
ACCOUNT NO. TB4450 CCB CREDIT SERV., INC. 5300 S. 6TH STREET SPRINGFIELD, IL 62703		Incurred: 2009 Consideration: Collection First Premier Bank				Notice Only
ACCOUNT NO. 52042338 CERTEGY PAYMENT REC. 11601 ROOSEVELY BLVD. ST. PETERSBURG, FL 33716		Incurred: 2008-2009 Consideration: NSF checks Collection				1,050.00
ACCOUNT NO. 24252134 CERTEGY PAYMENT REC. 11601 ROOSEVELY BLVD. ST. PETERSBURG, FL 33716		Incurred: 2008-2009 Consideration: Collection				Notice Only
ACCOUNT NO. 802000151043098965 CHASE 800 BROOKSEDGE BLVD. WESTERVILLE, OH 43081		Incurred: 2008-2010 Consideration: Credit card debt				671.00

Sheet no. 4 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal \$ 1,721.00

Total \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 54016830373225234408 CHASE PO BOX 15298 WILMINGTON, DE 19850		Incurred: 2008-2010 Consideration: Credit card debt				754.00
ACCOUNT NO. 4266841118804408 CHASE MANHATTAN BANK 900 STEWART AVENUE GARDEN CITY, NY 11530		Incurred: 2008-2010 Consideration: Credit card debt				640.00
ACCOUNT NO. 03791979 CHASE RECEIVABLES 1247 BROADWAY SONOMA, CA 95476		Incurred: 2010 Consideration: Collection Figis				Notice Only
ACCOUNT NO. CHEXSYSTEMS CONSUMER RELATIONS 7805 HUDSON RD;SUI 100 WOODBURY, MN 55125		Consideration: Credit card debt				Notice Only
ACCOUNT NO. CITIBANK PO BOX 6500 SIOUX FALLS, SD 57117		Incurred: 2009-2010 Consideration: Credit card debt				Notice Only

Sheet no. 5 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 1,394.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.		Consideration: Credit card debt				
CITIBANK PO BOX 6248 SIOUX FALLS, SD 57117						Notice Only
ACCOUNT NO.		Incurred: 2008-2009 Consideration: Credit card debt				
CITIBANK BANKRUPTCY 7920 NW 110TH STREET KANSAS CITY, MO 64153						Notice Only
ACCOUNT NO. 3387978		Incurred: 2008-2010 Consideration: Collection				
CPS SECURITY PO BOX 782408 SAN ANTONIO, TX 78278						347.00
ACCOUNT NO. 4424430		Incurred: 2008-2010 Consideration: Collection JC Penny				
CREDIT CONTROL, LLC 245 EAST ROSELAWN AVENUE SUITE 25-26 MAPLEWOOD, MN 55117						Notice Only
ACCOUNT NO. 4424430		Incurred: 2009 Consideration: Collection Hilco Receivables LLC				
CREDIT CONTROL, LLC 245 EAST ROSELAWN SUITE 25 MAPLEWOOD, MN 55117						Notice Only

Sheet no. 6 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 347.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 70000172904 DIRECT LOANS PO BOX 7202 UTICA, NY 13504		Incurred: 2001 Consideration: Student Loans				26,575.00
ACCOUNT NO. DISCOVER CARD PO BOX 30943 SALT LAKE CITY, UT 84130						0.00
ACCOUNT NO. DISCOVER FINANCIAL SERV. ATTN: BANKRUPTCY DEPT. PO BOX 8003 HILLIARD, OH 43026		Incurred: 2009-2010 Consideration: Credit card debt				Notice Only
ACCOUNT NO. 14416582 & 2010237308052 ELEN HAYES HOSPITAL ROUTE 9W N. W. HAVERSTRAW, NY 10993		Incurred: 2010 Consideration: Hospital				Notice Only
ACCOUNT NO. 56873778 & 57190902 ENHANCED RECOVERY CORP. PO BOX 17242 DENVER, CO 80217		Incurred: 2011 Consideration: Collection Two Account Verizon				Notice Only

Sheet no. 7 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal \$ 26,575.00

Total \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6008890204405120 ENHANCED RECOVERY CORP. PO BOX 17242 DENVER, CO 80217		Incurred: 2008-2009 Consideration: Collection GE Money				Notice Only
ACCOUNT NO. 6008890204406120 EQUABLE ASCENT FINANCI 1120 W LAKE COOK RD STE B BUFFALO, GROVE, IL 60089		Incurred: 2008-2010 Consideration: Collection JC Penny & Wells Fargo				Notice Only
ACCOUNT NO. T74626216 ER SOLUTIONS INC. 10750 HAMMERLY BLVD. #200 HOUSTON ,TX 77043		Incurred: 2008-2010 Consideration: Collection Chase Bank				Notice Only
ACCOUNT NO. B19664288 ERS SOLUTIONS 800 SW 39TH STREET PO BOX 9004 RENTON, WA 98057		Incurred: 2010 Verizon				Notice Only
ACCOUNT NO. FIGI'S 3200 S. MAPLE AVENUE ATTN: RECOVERY OPERATIONS MARSHFIELD, WI 54449		Incurred: 2008-2009 Consideration: Collection				Notice Only

Sheet no. 8 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal \$ 0.00

Total \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 2286802018 FINGERHUT 6250 RIDGEWOOD ROAD ST. CLOUD, MN 56303		Incurred: 2011 Consideration: Revolving charge account Metabank				278.00
ACCOUNT NO. 4869557101571017 FIRST PREMIER BANK CENTENNIAL PO BOX 5524 SIOUX FALLS, SD 57117		Incurred: 2007-2009 Consideration: Credit card debt Two Accounts				1,188.00
ACCOUNT NO. 013245356 FMS INC. 4915 S. UNION AVENUE TULSA, OK 74107		Incurred: 2009 Consideration: Collection Certegey Payment Recovery Services Inc				Notice Only
ACCOUNT NO. GE MONEY BANK BANKRUPTCY DEPT. PO BOX 10314 ROSWELL, GA 30076		Consideration: Credit card debt				Notice Only
ACCOUNT NO. GE MONEY BANK PO BOX 981127 EL PASO, TX 79998		Consideration: Credit card debt				Notice Only

Sheet no. 9 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 1,466.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 29871844 GENESIS FINANCIAL SOL. PO BOX 4865 BEAVERTON, OR 97076		Incurred: 2008-2010 Consideration: Collecton First Premier Bank				552.00
ACCOUNT NO. 7888743647630 GINNY'S 1112 7TH AVENUE MONROE, WI 53566		Incurred: 2008 Consideration: Credit card debt				91.00
ACCOUNT NO. 6008890204405120 HILCO RECEIVABLES 5 REVERE DRIVE NORTHBROOK, IL 60062		Incurred: 2006-2008 Consideration: Credit card debt Ge Money				407.00
ACCOUNT NO. HOGAN WILLIG 2410 N. FOREST RD #301 GETZVILLE, NY 14068						Notice Only
ACCOUNT NO. HSBC CARD SERVICES. PO BOX 81622 SALINAS, CA 93912		Incurred: 2009-2010 Consideration: Credit card debt				0.00

Sheet no. 10 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 1,050.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. HSBC BANK PO BOX 5268 CAROL STREAM IL 60197		Consideration: Credit card debt				Notice Only
ACCOUNT NO. 5440455033015812 HSBC NEVADA PO BOX 5253 CAROL STREAMS, IL 60197		Incurred: 2008-2009 Consideration: Credit card debt				1,083.00
ACCOUNT NO. 684216320 HSN COLLECTION DEPARTMENT PO BOX 9090 CLEARWATER, FL 33758		Incurred: 2010-2011 Consideration: Collection Three Accounts				300.00
ACCOUNT NO. 32004780189 IC SYSTEMS, INC. 444 HIGHWAY 96 EAST PO BOX 64887 ST. PAUL, MN 55164		Incurred: 2010 Consideration: Collection Verizon				Notice Only
ACCOUNT NO. 6008890204405120 JC PENNY PO BOX 981131 EL PASO, TX 79998		Incurred: 2008-2010 Consideration: Credit card debt				407.00

Sheet no. 11 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 1,790.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						
JH HOLDINGS 5230 LAS VIGENAS RD. SUITE 265 CARABASAS, CA 91302						Notice Only
ACCOUNT NO.						
JP MORGANCHASELEGAL 1985 MARCUS AVENUE NEW HYDE PARK, NY 11042						Notice Only
ACCOUNT NO. 8169993211 & 8578862513						
LAW OFFICES OF MITCHELL N. KAY, P.C. 7 PENN PLAZA NEW YORK, NY 10001		Incurred: 2008-2010 Consideration: Collection Capital One Bank & Chase Bank				Notice Only
ACCOUNT NO. 26870						
LHR INC. 56 MAIN STREET HAMBURG, NY 14075		Incurred: 2009-2011 Consideration: Collection Hsbc Banking				Notice Only
ACCOUNT NO.						
MACYS 9111 DUKE BLVD. MASON, OH 45040						Notice Only

Sheet no. 12 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 0.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5358044 MALCOLM S. GERALD & ASSOCIATES, INC 332 SOUTH MICHIGAN AVENUE, SUITE 600 CHICAGO, ILLINOIS 60604		Incurred: 2008-2009 Consideration: Collection Hsbc Bank Two Accounts				Notice Only
ACCOUNT NO. 065819475550 MIDNIGHT VELVET 1112 7TH AVENUE MONROE, WI 53566		Incurred: 2008-2010 Consideration: Revolving charge account				Notice Only
ACCOUNT NO. 5440450070311356 MRC RECEIVABLES CORP. 5775 ROSCOE COURT SAN DIEGO, CA 92123		Incurred: 2008-2009 Consideration: Revolving charge account				3,461.00
ACCOUNT NO. 6788236 NATIONAL ASSET RECOVERY, INC. PO BOX 701 CHESTEFIELD, MO 63006		Incurred: 2011-2012 Consideration: Collection First Premier Bank				Notice Only
ACCOUNT NO. 1793077079015972 NCO FINANCIAL 507 PRUDENTIAL ROAD HORSHAM, PA 19044		Incurred: 2010 Consideration: Collection Mta Bridge & Tunnels				72.00

Sheet no. 13 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 3,533.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson, Debtor

Case No. (If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. GDG429 NCO FINANCIAL 507 PRUDENTIAL ROAD HORSHAM, PA 19044		Incurred: 2010 Consideration: Collection Bank of America				Notice Only
ACCOUNT NO. 2929288006 NCO FINANCIAL 507 PRUDENTIAL ROAD HORSHAM, PA 19044		Incurred: 2010-2011 Consideration: Collection Orange & Rockland Utility				Notice Only
ACCOUNT NO. F24632439 & F49072028 NORTHLAND GROUP PO BOX 390846 EDINA, MN 55439		Incurred: 2008 Consideration: Collection Capital One Bank & Hsbc Bank Nevada				Notice Only
ACCOUNT NO. 2929288006 ORANGE & ROCKLAND UTILITIES 1 BLUE HILL PLAZA PEARL RIVER, NY 10965		Incurred: 2008-2010 Consideration: Utilities				332.00
ACCOUNT NO. ORCHARD BANK HSBC CARD SERVICES PO BOX 80084 SALINAS, CA 93912		Consideration: Credit card debt				Notice Only

Sheet no. 14 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal \$ 332.00

Total \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 486955710157101 PENN CREDIT CORP. PO BOX 1259 DEPT 91047 OAKS, PA 19456		Incurred: 2008 Consideration: Collection Equable Ascent Financial				Notice Only
ACCOUNT NO. C89335210008 PENN CREDIT CORP. PO BOX 988 HARRISBURG, PA 17108		Incurred: 2008-2009 Consideration: Collection Midnight Velvet				Notice Only
ACCOUNT NO. S4258630 PENN CREDIT CORP. PO BOX 988 HARRISBURG, PA 17108		Incurred: 2011 Consideration: Collection Verizon				Notice Only
ACCOUNT NO. C8933521 PENN CREDIT CORP. PO BOX 988 HARRISBURG, PA 17108		Incurred: 2010 Consideration: Collection Swiss Colony				Notice Only
ACCOUNT NO. PINNACLE CREDIT SERVICES DEPT 673 PO BOX 4115 CONCORD, CA 94524						Notice Only

Sheet no. 15 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 0.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. LAX523 PINNACLE FINANCIAL GRP 7825 WASHINGTON AVE S STE 410 MINNEAPOLIS, MN 55439		Incurred: 2009-2010 Consideration: Collection First Premier Bank				Notice Only
ACCOUNT NO. 11676076 PROFESSIONAL RECOVERY CONSULTS 2700 MERIDIAN PARKWAY SUITE 200 DURHAM, NC 27713		Incurred: 2011 Consideration: Collection Figis Inc				Notice Only
ACCOUNT NO. REGIONS BANK DBA REGION S MORTGAGE PO BOX 11026 ORANGE, CA 92856						0.00
ACCOUNT NO. RONALD MOSES, MARSHAL 116 JOHN STREET 15TH FLOOR NEW YORK, NY 10038						Notice Only
ACCOUNT NO. 29871844 RPM 20816 44TH AVENUE W LYNWOOD, WA 98036		Incurred: 2008-2010 Consideration: Collection Genesis Financial Services				552.00

Sheet no. 16 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 552.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. RUBIN & ROTHMAN PO BOX 9003 ISLANDIA, NY 11749						Notice Only
ACCOUNT NO. SEARS ROEBUCK & CO. PO BOX 6283 SIOUX FALLS, SD 57117		Consideration: Credit card debt				Notice Only
ACCOUNT NO. 06581947584A SWISS COLONY PO BOX 740933 DALLAS, TX 75374		Incurred: 2008-2009 Consideration: Revolving charge account				75.00
ACCOUNT NO. 241084088 T-MOBILE WIRELESS CUSTOMER RELATIONS PO BOX 37380 ALBUQUERQUE, NM 87176		Incurred: 2009-2010 Consideration: Telephone Services				237.00
ACCOUNT NO. 3645033056 THE BOURASSA LAW GROUP, LLC P.O. BOX 28039 LAS VEGAS, NV 89126		Incurred: 2008-2010 Consideration: NSF checks				637.00

Sheet no. 17 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal \$ 949.00

Total \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 01014508339 THE CBE GROUP, INC. 131 TOWER PARK SUITE 100-PO BOX 2547 WATERLOO, IA 50704		Incurred: 2010 Consideration: Collection				Notice Only
ACCOUNT NO. 900538 TRIDENT ASSET MANAGEMENT 5755 N POINT PKWY SUITE 12 ALPHARETTA, GA 30022		Incurred: 2012 Consideration: Collection Five Accounts Yonkers Raceway Retail				Notice Only
ACCOUNT NO. 17082001720720 TRS RECOVERY SERV. 5251 WESTHEIMER HOUSTON, TX 77056		Incurred: 2008-2009 Consideration: Collections Non Sufficient Funds				120.00
ACCOUNT NO. 80094981 UNITED COLLECTION BUR., INC. 5620 SOUTHWYCK BLVD STE 206 TOLEDO, OH 43614		Incurred: 2009 Consideration: Collection Chase Bank				Notice Only
ACCOUNT NO. 5313 UNITED RECOVERY SYSTEMS, INC. P.O. BOX 630339 HOUSTON, TX 77263		Incurred: 2010 Consideration: Collection Capital One Auto Sales				Notice Only

Sheet no. 18 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 120.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson,
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 09090890615 UNIVERSAL FIDELITY CORP. PO BOX 941911 HOUSTON, TX 77094		Incurred: 2009 Consideration: Collection Midnight Velvet				Notice Only
ACCOUNT NO. 26329664 VAN RU CREDIT CORP. 10024 SKOKIE BLVD. SUITE 2 SKOKIE, IL 60077		Incurred: 2008 Consideration: Collection Figis				Notice Only
ACCOUNT NO. 7186712432905231 VERIZON 140 WEST STREET LOBBY 1 NEW YORK, NY 10007		Incurred: 2008-2010 Consideration: Revolving charge account				289.00
ACCOUNT NO. VERIZON BANKRUPTCY PO BOX 3037 BLOOMINGTON, IL 61702						Notice Only
ACCOUNT NO. 5023740472421 WELLS FARGO LOSS RECOVERY PO BOX 29704 PHEONIX, AZ 85038		Incurred: 2008 Consideration: Revolving charge account Auto				Notice Only

Sheet no. 19 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal > \$ 289.00

Total > \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Carolyn Peterson
Debtor

Case No. _____
(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						
WELLSFARGO AUTO FINANCE MAC MAIL N7601-010 PO BOX 28724 KANSAS CITY, MO 64188						Notice Only
ACCOUNT NO.						
WFNNB BANKRUPTCY DEPARTMENT PO BOX 182125 COLUMBUS, OH 43218						Notice Only
ACCOUNT NO.						
YONKERS RACEWAY 810 YONKERS AVENUE YONKERS, NY 10704						Notice Only
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. 20 of 20 continuation sheets attached
to Schedule of Creditors Holding Unsecured
Nonpriority Claims

Subtotal \$ 0.00

Total \$ 54,119.51

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the
Statistical Summary of Certain Liabilities and Related Data.)

In re Carolyn Peterson
Debtor Case No. (if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

In re Carolyn Peterson Case No. _____
Debtor (if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

B6I (Official Form 6I) (12/07)In re Carolyn PetersonCase _____
(if known)

Debtor

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status: Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): daughter	AGE(S): 17
Employment:	DEBTOR	SPOUSE
Occupation	Assistant Principal	
Name of Employer	NYC Dept of Education	
How long employed	15 years	
Address of Employer	Bronx, NY	N.A.

INCOME: (Estimate of average or projected monthly income at time case filed)

1. Monthly gross wages, salary, and commissions

(Prorate if not paid monthly.)

DEBTOR	SPOUSE
\$ 9,668.00	\$ N.A.

2. Estimated monthly overtime

\$ 0.00	\$ N.A.
---------	---------

3. SUBTOTAL

\$ 9,668.00	\$ N.A.
-------------	---------

4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security

- b. Insurance

- c. Union Dues

- d. Other (Specify:
- pns/pns ln
-)

\$ 3,300.00	\$ N.A.
\$ 0.00	\$ N.A.
\$ 142.00	\$ N.A.
\$ 1,528.00	\$ N.A.

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ 4,970.00	\$ N.A.
-------------	---------

- 6.. TOTAL NET MONTHLY TAKE HOME PAY

\$ 4,698.00	\$ N.A.
-------------	---------

7. Regular income from operation of business or profession or farm

(Attach detailed statement)

\$ 0.00	\$ N.A.
---------	---------

8. Income from real property

\$ 0.00	\$ N.A.
---------	---------

9. Interest and dividends

\$ 0.00	\$ N.A.
---------	---------

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

\$ 0.00	\$ N.A.
---------	---------

11. Social security or other government assistance

(Specify) _____

\$ 0.00	\$ N.A.
---------	---------

12. Pension or retirement income

\$ 0.00	\$ N.A.
---------	---------

13. Other monthly income

(Specify) _____

\$ 0.00	\$ N.A.
---------	---------

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ 0.00	\$ N.A.
---------	---------

15. AVERAGE MONTHLY INCOME (Add amounts shown on Lines 6 and 14)

\$ 4,698.00	\$ N.A.
-------------	---------

16. COMBINED AVERAGE MONTHLY INCOME (Combine column totals from line 15)

\$ 4,698.00	
-------------	--

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

None

In re Carolyn Peterson

Debtor

Case No. _____

(if known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home) \$ 1,619.90
 - a. Are real estate taxes included? Yes _____ No ✓
 - b. Is property insurance included? Yes _____ No ✓
2. Utilities: a. Electricity and heating fuel \$ 0.00
 - b. Water and sewer \$ 0.00
 - c. Telephone \$ 0.00
 - d. Other Cable Internet \$ 144.00
3. Home maintenance (repairs and upkeep) \$ 0.00
4. Food \$ 975.00
5. Clothing \$ 250.00
6. Laundry and dry cleaning \$ 100.00
7. Medical and dental expenses \$ 145.00
8. Transportation (not including car payments) \$ 300.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ 0.00
10. Charitable contributions \$ 45.00
11. Insurance (not deducted from wages or included in home mortgage payments)
 - a. Homeowner's or renter's \$ 0.00
 - b. Life \$ 0.00
 - c. Health \$ 0.00
 - d. Auto \$ 0.00
 - e. Other grooming \$ 100.00
12. Taxes (not deducted from wages or included in home mortgage payments)
(Specify) _____ \$ 0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)
 - a. Auto \$ 412.34
 - b. Other _____ \$ 0.00
 - c. Other _____ \$ 0.00
14. Alimony, maintenance, and support paid to others \$ 0.00
15. Payments for support of additional dependents not living at your home \$ 0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ 0.00
17. Other Cell Phone \$ 150.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data) \$ 4,241.24
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:
None
20. STATEMENT OF MONTHLY NET INCOME
 - a. Average monthly income from Line 15 of Schedule I \$ 4,698.00
 - b. Average monthly expenses from Line 18 above \$ 4,241.24
 - c. Monthly net income (a. minus b.) \$ 456.76

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Southern District of New York

In re Carolyn Peterson
Debtor

Case No. _____

Chapter 13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 0.00		
B - Personal Property	YES	3	\$ 95,543.00		
C - Property Claimed as exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1		\$ 36,831.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	21		\$ 54,119.51	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 4,698.00
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 4,241.24
TOTAL		33	\$ 95,543.00	\$ 90,950.51	

United States Bankruptcy Court

Southern District of New York

In re Carolyn Peterson

Case No. _____

Debtor

Chapter 13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the Following:

Average Income (from Schedule I, Line 16)	\$ 4,698.00
Average Expenses (from Schedule J, Line 18)	\$ 4,241.24
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 9,668.00

State the Following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 19,531.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 54,119.51
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 73,650.51

Carolyn Peterson

In re _____ Case No. _____
Debtor (If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 35 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date April 16, 2012

Signature: /s/ Carolyn Peterson
Debtor

Date _____

Signature: Not Applicable
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,
of Bankruptcy Petition Preparer

Social Security No.
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X _____
Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the _____ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the _____ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: _____

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

In Re Carolyn Peterson

Case No. _____
(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None
☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2012	24,000	
2011	120,575	
2010	130,907	

2. Income other than from employment or operation of business

None



State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

3. Payments to creditors

None



Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF
PAYMENTS

AMOUNT
PAID

AMOUNT STILL
OWING

None



b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after date of adjustment.*

NAME AND ADDRESS OF CREDITOR
AND RELATIONSHIP TO DEBTOR

DATES OF
PAYMENTS

AMOUNT
PAID

AMOUNT STILL
OWING

None



c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR
AND RELATIONSHIP TO DEBTOR

DATES OF
PAYMENTS

AMOUNT PAID

AMOUNT STILL
OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR
AGENCY AND LOCATION

STATUS OR
DISPOSITION

Riverbay Corporation
vs
Carolyn Peterson
6536/12

Civil

Bronx County
851 Grand Concourse
Bronx, NY 10451

Judgment

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF
PERSON FOR WHOSE BENEFIT
PROPERTY WAS SEIZED

DATE OF
SEIZURE

DESCRIPTION AND
VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF
CREDITOR OR SELLER

DATE OF REPOSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN

DESCRIPTION AND
VALUE OF PROPERTY

6. Assignments and Receiverships

- None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS
OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF
ASSIGNMENT
OR SETTLEMENT

- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS
OF CUSTODIAN

NAME AND LOCATION
OF COURT CASE TITLE
& NUMBER

DATE OF
ORDER

DESCRIPTION AND
VALUE OF PROPERTY

7. Gifts

- None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF
PERSON OR ORGANIZATION

RELATIONSHIP
TO DEBTOR, IF ANY

DATE OF
GIFT

DESCRIPTION AND
VALUE OF GIFT

8. Losses

- None ☒ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION
AND VALUE
OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS
WAS COVERED IN WHOLE OR IN PART BY
INSURANCE, GIVE PARTICULARS

DATE OF
LOSS

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
David J. Babel, Esq., P.C. 2525 Eastchester Road Bronx, NY 10469		\$2,100

10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None ☒ NAME OF TRUST OR OTHER DEVICE DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
American Airlines Credit Union	Savings Closing Balance: 11/11	00.00

12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
------------------------------	--------------------------------------	----------------------

15. Prior address of debtor

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
---------	-----------	--------------------

16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
--------------------------	--	-------------------	----------------------

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
--	---------------	-----------------------

18. Nature, location and name of business

None



a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



NAME

ADDRESS

[Questions 19 - 25 are not applicable to this case]

* * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date

April 16, 2012

Signature
of Debtor

/s/ Carolyn Peterson

CAROLYN PETERSON

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X_____
Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

AFNI
404 BROCK DRIVE
PO BOX 3427
BLOOMINGTON, IL 61702

ALLIANCE ASSET MANAGEMENT, INC
DEPARTMENT # 5975
PO BO 1259
OAKS, PA 19456

ALLIED INTERSTATE
PO BOX 436
MINNEAPOLIS, MN 55440

ALLIED INTERSTATE
PO BOX 436
MINNEAPOLIS, MN 55440

AMERICAN CORADIUS, INC.
300 ESSJAY ROAD
SUITE 150
WILLIAMSVILLE, NY 14221

AMERICAN EXPRESS
CUSTOMER SERVICE
PO BOX 981535
EL PASO, TX 79998

AMERICAN EXPRESS
CUSTOMER SERVICE
PO BOX 981540
EL PASO, TX 79998

AMERICREDIT
PO BOX 183123
ARLINGTON, TX 76096

ASSOCIATED REC.
PO BOX 469048
ESCONDIDO, CA 92046

BANK OF AMERICA
PO BOX 15026
WILMINGTON, DE19886

BANK OF AMERICA
RETAIL LOAN SERVICES
P.O. BOX 2759
JACKSONVILLE, FL 32203

BENNET LAW PLLC
PO BOX 9163
MIDVALE, UT 84047

BENNETT LAW INC
10542 SOUTH JORDAN GATEWAY
SUITE 200
SOUTH JORDAN, UTAH, 84095

CAPITAL MANAGEMENT SERVICES, LP
726 EXCHANGE STREET
SUITE 700
BUFFALO, NY 14210

CAPITAL ONE AUTO
FINANCE
3905 DALLAS PARKWAY
PLANO, TX 75093

CAPITAL ONE BANK
P.O. BOX 30285
SALT LAKE CITY, UT 84130

CAPITAL ONE SERVICES, INC.
1957 WESTMORELAND ROAD
RICHMOND, VA 23276

CASHCALL
PO BOX 66007
ANAHEIM CA 92816

CBCS
PO BOX 165025
COLUMBUS, OH 43216

CBE GROUP
1309 TECHNOLOGY PKWAY
CEDAR FALLS, IA 50613

CCB CREDIT SERV., INC.
5300 S. 6TH STREET
SPRINGFIELD, IL 62703

CCB CREDIT SERV., INC.
5300 S. 6TH STREET
SPRINGFIELD, IL 62703

CERTEGY PAYMENT REC.
11601 ROOSEVELY BLVD.
ST. PETERSBURG, FL 33716

CERTEGY PAYMENT REC.
11601 ROOSEVELY BLVD.
ST. PETERSBURG, FL 33716

CHASE
800 BROOKSEDGE BLVD.
WESTERVILLE, OH 43081

CHASE
PO BOX 15298
WILMINGTON, DE 19850

CHASE MANHATTAN BANK
900 STEWART AVENUE
GARDEN CITY, NY 11530

CHASE RECEIVABLES
1247 BROADWAY
SONOMA, CA 95476

CHEXSYSTEMS
CONSUMER RELATIONS
7805 HUDSON RD;SUI 100
WOODBURY, MN 55125

CITIBANK
PO BOX 6500
SIOUX FALLS, SD 57117

CITIBANK
PO BOX 6248
SIOUX FALLS, SD 57117

CITIBANK BANKRUPTCY
7920 NW 110TH STREET
KANSAS CITY, MO 64153

CPS SECURITY
PO BOX 782408
SAN ANTONIO, TX 78278

CREDIT CONTROL, LLC
245 EAST ROSELAWN AVENUE
SUITE 25-26
MAPLEWOOD, MN 55117

CREDIT CONTROL, LLC
245 EAST ROSELAWN SUITE 25
MAPLEWOOD, MN 55117

DIRECT LOANS
PO BOX 7202
UTICA, NY 13504

DISCOVER CARD
PO BOX 30943
SALT LAKE CITY, UT 84130

DISCOVER FINANCIAL SERV.
ATTN: BANKRUPTCY DEPT.
PO BOX 8003
HILLIARD, OH 43026

ELEN HAYES HOSPITAL
ROUTE 9W N.
W. HAVERSTRAW, NY 10993

ENHANCED RECOVERY CORP.
PO BOX 17242
DENVER, CO 80217

ENHANCED RECOVERY CORP.
PO BOX 17242
DENVER, CO 80217

EQUABLE ASCENT FINANCI
1120 W LAKE COOK RD
STE B
BUFFALO, GROVE, IL 60089

ER SOLUTIONS INC.
10750 HAMMERLY BLVD.
#200
HOUSTON ,TX 77043

ERS SOLUTIONS
800 SW 39TH STREET
PO BOX 9004
RENTON, WA 98057

FIGI'S
3200 S. MAPLE AVENUE
ATTN: RECOVERY OPERATIONS
MARSHFIELD, WI 54449

FINGERHUT
6250 RIDGEWOOD ROAD
ST. CLOUD, MN 56303

FIRST PREMIER BANK
CENTENNIAL
PO BOX 5524
SIOUX FALLS, SD 57117

FMS INC.
4915 S. UNION AVENUE
TULSA, OK 74107

GE MONEY BANK
BANKRUPTCY DEPT.
PO BOX 10314
ROSWELL, GA 30076

GE MONEY BANK
PO BOX 981127
EL PASO, TX 79998

GENESIS FINANCIAL SOL.
PO BOX 4865
BEAVERTON, OR 97076

GINNY'S
1112 7TH AVENUE
MONROE, WI 53566

HILCO RECEIVABLES
5 REVERE DRIVE
NORTHBROOK, IL 60062

HOGAN WILLIG
2410 N. FOREST RD
#301
GETZVILLE, NY 14068

HSBC
CARD SERVICES.
PO BOX 81622
SALINAS, CA 93912

HSBC BANK
PO BOX 5268
CAROL STREAM IL 60197

HSBC NEVADA
PO BOX 5253
CAROL STREAMS, IL 60197

HSN COLLECTION DEPARTMENT
PO BOX 9090
CLEARWATER, FL 33758

IC SYSTEMS, INC.
444 HIGHWAY 96 EAST
PO BOX 64887
ST. PAUL, MN 55164

JC PENNY
PO BOX 981131
EL PASO, TX 79998

JH HOLDINGS
5230 LAS VIGENAS RD.
SUITE 265
CARABASAS, CA 91302

JP MORGANCHASELEGAL
1985 MARCUS AVENUE
NEW HYDE PARK, NY 11042

LAW OFFICES OF MITCHELL N. KAY, P.C.
7 PENN PLAZA
NEW YORK, NY 10001

LAZARUS LAZARUS WINSTON
3699 BAINBRIDGE AVENUE
BRONX, NY 10467

LHR INC.
56 MAIN STREET
HAMBURG, NY 14075

MACYS
9111 DUKE BLVD.
MASON, OH 45040

MALCOLM S. GERALD & ASSOCIATES, INC
332 SOUTH MICHIGAN AVENUE,
SUITE 600
CHICAGO, ILLINOIS 60604

MIDNIGHT VELVET
1112 7TH AVENUE
MONROE, WI 53566

MRC RECEIVABLES CORP.
5775 ROSCOE COURT
SAN DIEGO, CA 92123

NATIONAL ASSET
RECOVERY, INC.
PO BOX 701
CHESTEFIELD, MO 63006

NCO FINANCIAL
507 PRUDENTIAL ROAD
HORSHAM, PA 19044

NCO FINANCIAL
507 PRUDENTIAL ROAD
HORSHAM, PA 19044

NCO FINANCIAL
507 PRUDENTIAL ROAD
HORSHAM, PA 19044

NORTHLAND GROUP
PO BOX 390846
EDINA, MN 55439

ORANGE & ROCKLAND UTILITIES
1 BLUE HILL PLAZA
PEARL RIVER, NY 10965

ORCHARD BANK
HSBC CARD SERVICES
PO BOX 80084
SALINAS, CA 93912

PENN CREDIT CORP.
PO BOX 1259
DEPT 91047
OAKS, PA 19456

PENN CREDIT CORP.
PO BOX 988
HARRISBURG, PA 17108

PENN CREDIT CORP.
PO BOX 988
HARRISBURG, PA 17108

PENN CREDIT CORP.
PO BOX 988
HARRISBURG, PA 17108

PINNACLE CREDIT SERVICES
DEPT 673
PO BOX 4115
CONCORD, CA 94524

PINNACLE FINANCIAL GRP
7825 WASHINGTON AVE S
STE 410
MINNEAPOLIS, MN 55439

PROFESSIONAL RECOVERY CONSULTS
2700 MERIDIAN PARKWAY SUITE 200
DURHAM, NC 27713

REGIONS BANK
DBA REGION S MORTGAGE
PO BOX 11026
ORANGE, CA 92856

RIVERBAY CORP.
LEGAL
2049 BARTOW AVENUE
BRONX, NY 10475

RONALD MOSES, MARSHAL
116 JOHN STREET
15TH FLOOR
NEW YORK, NY 10038

RPM
20816 44TH AVENUE W
LYNWOOD, WA 98036

RUBIN & ROTHMAN
PO BOX 9003
ISLANDIA, NY 11749

SEARS ROEBUCK & CO.
PO BOX 6283
SIOUX FALLS, SD 57117

SWISS COLONY
PO BOX 740933
DALLAS, TX 75374

T-MOBILE WIRELESS
CUSTOMER RELATIONS
PO BOX 37380
ALBUQUERQUE, NM 87176

THE BOURASSA LAW GROUP, LLC
P.O. BOX 28039
LAS VEGAS, NV 89126

THE CBE GROUP, INC.
131 TOWER PARK
SUITE 100-PO BOX 2547
WATERLOO, IA 50704

TRIDENT ASSET MANAGEMENT
5755 N POINT PKWY
SUITE 12
ALPHARETTA, GA 30022

TRS RECOVERY SERV.
5251 WESTHEIMER
HOUSTON, TX 77056

UNITED COLLECTION BUR., INC.
5620 SOUTHWYCK BLVD
STE 206
TOLEDO, OH 43614

UNITED RECOVERY SYSTEMS, INC.
P.O. BOX 630339
HOUSTON, TX 77263

UNIVERSAL FIDELITY CORP.
PO BOX 941911
HOUSTON, TX 77094

VAN RU CREDIT CORP.
10024 SKOKIE BLVD.
SUITE 2
SKOKIE, IL 60077

VERIZON
140 WEST STREET
LOBBY 1
NEW YORK, NY 10007

VERIZON BANKRUPTCY
PO BOX 3037
BLOOMINGTON, IL 61702

WELLS FARGO LOSS RECOVERY
PO BOX 29704
PHEONIX, AZ 85038

WELLSFARGO AUTO FINANCE
MAC MAIL N7601-010
PO BOX 28724
KANSAS CITY, MO 64188

WFNNB
BANKRUPTCY DEPARTMENT
PO BOX 182125
COLUMBUS, OH 43218

YONKERS RACEWAY
810 YONKERS AVENUE
YONKERS, NY 10704

**UNITED STATES BANKRUPTCY COURT
Southern District of New York**

In re Carolyn Peterson,
Debtor

Case No. _____

Chapter 13

VERIFICATION OF LIST OF CREDITORS

I hereby certify under penalty of perjury that the attached List of Creditors which consists of 11 pages, is true,
correct and complete to the best of my knowledge.

Date April 16, 2012

Signature
of Debtor

/s/ Carolyn Peterson

CAROLYN PETERSON

B203
12/94

United States Bankruptcy Court
Southern District of New York

In re Carolyn Peterson

Case No. _____

Chapter 13

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ 5,900.00

Prior to the filing of this statement I have received \$ 2,100.00

Balance Due \$ 3,800.00

2. The source of compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation in adversary, contested matters, nonroutine matters, motions to avoid judicial liens or similar matters or any other unusual, unexpected or extraordinary work

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

April 16, 2012

Date

/s/ David J Babel

Signature of Attorney

David J. Babel, Esq., P.C.

Name of law firm

In re Carolyn Peterson
Debtor(s)
Case Number: _____
(If known)

According to the calculations required by this statement:

- ☐ The applicable commitment period is 3 years.
☒ The applicable commitment period is 5 years.
☒ Disposable income is determined under § 1325(b)(3).
☐ Disposable income not determined under § 1325(b)(3).

(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedule I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

Part I. REPORT OF INCOME

1	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. <input checked="" type="checkbox"/> Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. <input type="checkbox"/> Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.													
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.			Column A Debtor's Income	Column B Spouse's Income									
2	Gross wages, salary, tips, bonuses, overtime, commissions.			\$ 9,668.00	\$ N.A.									
3	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 45%;">Gross receipts</td> <td style="width: 15%; text-align: right;">\$ 0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Ordinary and necessary business expenses</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Business income</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </table>			a.	Gross receipts	\$ 0.00	b.	Ordinary and necessary business expenses	\$ 0.00	c.	Business income	Subtract Line b from Line a	\$ 0.00	\$ N.A.
a.	Gross receipts	\$ 0.00												
b.	Ordinary and necessary business expenses	\$ 0.00												
c.	Business income	Subtract Line b from Line a												
4	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 45%;">Gross receipts</td> <td style="width: 15%; text-align: right;">\$ 0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Ordinary and necessary operating expenses</td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Rent and other real property income</td> <td style="text-align: right;">Subtract Line b from Line a</td> </tr> </table>			a.	Gross receipts	\$ 0.00	b.	Ordinary and necessary operating expenses	\$ 0.00	c.	Rent and other real property income	Subtract Line b from Line a	\$ 0.00	\$ N.A.
a.	Gross receipts	\$ 0.00												
b.	Ordinary and necessary operating expenses	\$ 0.00												
c.	Rent and other real property income	Subtract Line b from Line a												
5	Interest, dividends and royalties.			\$ 0.00	\$ N.A.									
6	Pension and retirement income.			\$ 0.00	\$ N.A.									
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.			\$ 0.00	\$ N.A.									

8	<p>Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td style="width: 20%;">Debtor \$ <u>0.00</u></td> <td style="width: 40%;">Spouse \$ <u>N.A.</u></td> </tr> </table>	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ <u>0.00</u>	Spouse \$ <u>N.A.</u>	\$ 0.00	\$ N.A.			
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ <u>0.00</u>	Spouse \$ <u>N.A.</u>							
9	<p>Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 60%;"></td> <td style="width: 35%; text-align: right;">\$ 0.00</td> </tr> <tr> <td>b.</td> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> </table>	a.		\$ 0.00	b.		\$ 0.00	\$ 0.00	\$ N.A.
a.		\$ 0.00							
b.		\$ 0.00							
10	<p>Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).</p>	\$ 9,668.00	\$ N.A.						
11	<p>Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.</p>	\$ 9,668.00							

Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD

12	<p>Enter the Amount from Line 11.</p>	\$ 9,668.00									
13	<p>Marital adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">a.</td> <td style="width: 60%;"></td> <td style="width: 35%; text-align: right;">\$ 0.00</td> </tr> <tr> <td>b.</td> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td>c.</td> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> </table> <p>Total and enter on Line 13.</p>	a.		\$ 0.00	b.		\$ 0.00	c.		\$ 0.00	\$ 0.00
a.		\$ 0.00									
b.		\$ 0.00									
c.		\$ 0.00									
14	<p>Subtract Line 13 from Line 12 and enter the result.</p>	\$ 9,668.00									
15	<p>Annualized current monthly income for §1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.</p>	\$116,016.00									
16	<p>Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p> <p>a. Enter debtor's state of residence: <u>NewYork</u> b. Enter debtor's household size: <u>2</u></p>	\$ 56,113.00									
17	<p>Application of §1325(b)(4). Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement.</p> <p><input checked="" type="checkbox"/> The amount on Line 15 is more than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.</p>										

Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME

18	<p>Enter the Amount from Line 11.</p>	\$ 9,668.00
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19	<p>Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify, in the lines below, the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 65%;"></td> <td style="width: 30%; text-align: right;">\$ 0.00</td> </tr> <tr> <td style="text-align: center;">b.</td> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> <tr> <td style="text-align: center;">c.</td> <td></td> <td style="text-align: right;">\$ 0.00</td> </tr> </table> <p>Total and enter on Line 19.</p>	a.		\$ 0.00	b.		\$ 0.00	c.		\$ 0.00	\$ 0.00															
a.		\$ 0.00																								
b.		\$ 0.00																								
c.		\$ 0.00																								
20	Current monthly income for §1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$ 9,668.00																								
21	Annualized current monthly income for §1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.	\$ 116,016.00																								
22	Applicable median family income. Enter the amount from Line 16.	\$ 56,113.00																								
23	<p>Application of §1325(b)(3). Check the applicable box and proceed as directed.</p> <p><input checked="" type="checkbox"/> The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income is determined under §1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.</p> <p><input type="checkbox"/> The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is not determined under §1325(b)(3)" at the top of page 1 of this statement and continue with Part VII of this statement. Do not complete Parts IV, V or VI.</p>																									
Part IV. CALCULATION OF DEDUCTIONS FROM INCOME																										
Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)																										
24A	<p>National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.</p>	\$ 985.00																								
24B	<p>National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: left;">Persons under 65 years of age</th> <th colspan="3" style="text-align: left;">Persons 65 years of age or older</th> </tr> </thead> <tbody> <tr> <td style="width: 5%; text-align: center;">a1.</td> <td style="width: 55%;">Allowance per person</td> <td style="width: 20%; text-align: right;">60.00</td> <td style="width: 5%; text-align: center;">a2.</td> <td style="width: 55%;">Allowance per person</td> <td style="width: 20%; text-align: right;">144.00</td> </tr> <tr> <td style="text-align: center;">b1</td> <td>Number of persons</td> <td style="text-align: right;">2</td> <td style="text-align: center;">b2.</td> <td>Number of persons</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: center;">c1.</td> <td>Subtotal</td> <td style="text-align: right;">120.00</td> <td style="text-align: center;">c2.</td> <td>Subtotal</td> <td style="text-align: right;">0.00</td> </tr> </tbody> </table>	Persons under 65 years of age			Persons 65 years of age or older			a1.	Allowance per person	60.00	a2.	Allowance per person	144.00	b1	Number of persons	2	b2.	Number of persons	0	c1.	Subtotal	120.00	c2.	Subtotal	0.00	\$ 120.00
Persons under 65 years of age			Persons 65 years of age or older																							
a1.	Allowance per person	60.00	a2.	Allowance per person	144.00																					
b1	Number of persons	2	b2.	Number of persons	0																					
c1.	Subtotal	120.00	c2.	Subtotal	0.00																					
25A	<p>Local Standards: housing and utilities; non-mortgage expenses. Enter amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.</p>	\$ 654.00																								

25B	<p>Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero. BRONX COUNTY</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 60%;">IRS Housing and Utilities Standards; mortgage/rental expense</td><td style="width: 35%; text-align: right;">\$ 1,672.00</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47</td><td style="text-align: right;">\$ 0.00</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net mortgage/rental expense</td><td style="text-align: right;">Subtract Line b from Line a.</td></tr> </table>	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,672.00	b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$ 0.00	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$ 1,672.00
a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,672.00									
b.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47	\$ 0.00									
c.	Net mortgage/rental expense	Subtract Line b from Line a.									
26	<p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p> <div style="border: 1px solid black; height: 40px; margin-top: 10px;"></div>	\$ 0.00									
27A	<p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. NEW YORK</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. <input type="checkbox"/> 0 <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$ 342.00									
27B	<p>Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$ 0.00									
28	<p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 60%;">IRS Transportation Standards, Ownership Costs</td><td style="width: 35%; text-align: right;">\$ 496.00</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47</td><td style="text-align: right;">\$ 400.00</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td style="text-align: right;">Subtract Line b from Line a.</td></tr> </table>	a.	IRS Transportation Standards, Ownership Costs	\$ 496.00	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$ 400.00	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$ 96.00
a.	IRS Transportation Standards, Ownership Costs	\$ 496.00									
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47	\$ 400.00									
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.									

29	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero.										
	<table border="1"><tr><td>a.</td><td>IRS Transportation Standards, Ownership Costs</td><td>\$ 496.00</td></tr><tr><td>b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47</td><td>\$ 0.00</td></tr><tr><td>c.</td><td>Net ownership/lease expense for Vehicle 2</td><td>Subtract Line b from Line a.</td></tr></table>	a.	IRS Transportation Standards, Ownership Costs	\$ 496.00	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 0.00	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$ 0.00
a.	IRS Transportation Standards, Ownership Costs	\$ 496.00									
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 0.00									
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.									
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.	\$ 3,300.00									
31	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.	\$ 1,392.00									
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.	\$ 0.00									
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 49.	\$ 0.00									
34	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	\$ 0.00									
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.	\$ 0.00									
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.	\$ 0.00									
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunications services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$ 299.00									
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.	\$ 8,860.00									
Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 24-37											

39	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.				
	a.	Health Insurance	\$	0.00	
	b.	Disability Insurance	\$	0.00	
	c.	Health Savings Account	\$	0.00	
Total and enter on Line 39					\$ 0.00
If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ 0.00					
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.				\$ 0.00
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.				\$ 0.00
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.				\$ 0.00
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.				\$ 0.00
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				\$ 35.00
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.				\$ 300.00
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.				\$ 335.00
Subpart C: Deductions for Debt Payment					
47	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes and insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47.				
		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?
	a.	Nissan Motor	Auto	\$ 400.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
	b.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
	c.			\$ 0.00	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
				Total: Add Lines a, b and c	\$ 400.00

48	Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.			
		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount
	a.			\$ 0.00
	b.			\$ 0.00
	c.			\$ 0.00
48			Total: Add Lines a, b and c	\$ 0.00
49	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.			\$ 0.00
50	Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the resulting administrative expense.			
	a.	Projected average monthly Chapter 13 plan payment.	\$ 3,800.00	
	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	8.3 %	
	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$ 315.40
51	Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.			\$ 715.40
Subpart D: Total Deductions from Income				
52	Total of all deductions from income. Enter the total of Lines 38, 46, and 51.			\$ 9,910.40
Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)				
53	Total current monthly income. Enter the amount from Line 20.			\$ 9,668.00
54	Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.			\$ 0.00
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).			\$ 0.00
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.			\$ 9,910.40
57	Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expenses necessary and reasonable.			
		Nature of special circumstances	Amount of expense	
	a.		\$	
	b.		\$	
	c.		\$	
			Total: Add Lines a, b and c	\$ 0.00

58	Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56 and 57 and enter the result.	\$ 9,910.40
59	Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result.	\$ -242.40

Part VI: ADDITIONAL EXPENSE CLAIMS

60	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.	
	Expense Description	Monthly Amount
	a.	\$ 0.00
	b.	\$ 0.00
c.	\$ 0.00	
	Total: Add Lines a, b and c	0.00

Part VII: VERIFICATION

61	I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this a joint case, both debtors must sign.)</i>	
	Date: April 16, 2012	Signature: /s/ Carolyn Peterson (Debtor)
	Date: _____	Signature: _____ (Joint Debtor, if any)

Form 22 Continuation Sheet

Form 22 Continuation Sheet					
Income Month 1			Income Month 2		
Gross wages, salary, tips...	9,668.00	0.00	Gross wages, salary, tips...	9,668.00	0.00
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	0.00	Other Income...	0.00	0.00
Income Month 3			Income Month 4		
Gross wages, salary, tips...	9,668.00	0.00	Gross wages, salary, tips...	9,668.00	0.00
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	0.00	Other Income...	0.00	0.00
Income Month 5			Income Month 6		
Gross wages, salary, tips...	9,668.00	0.00	Gross wages, salary, tips...	9,668.00	0.00
Income from business...	0.00	0.00	Income from business...	0.00	0.00
Rents and real property income...	0.00	0.00	Rents and real property income...	0.00	0.00
Interest, dividends...	0.00	0.00	Interest, dividends...	0.00	0.00
Pension, retirement...	0.00	0.00	Pension, retirement...	0.00	0.00
Contributions to HH Exp...	0.00	0.00	Contributions to HH Exp...	0.00	0.00
Unemployment...	0.00	0.00	Unemployment...	0.00	0.00
Other Income...	0.00	0.00	Other Income...	0.00	0.00
Additional Items as Designated, if any					
Remarks					